

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA
LOS ANGELES

In Re. CRESTLLOYD, LLC.

Case No. 21-18205

Debtor(s)

§
§
§
§

☐ Jointly Administered

Monthly Operating Report

Chapter 11

Reporting Period Ended: 11/30/2021

Petition Date: 10/26/2021

Months Pending: 1

Industry Classification: 5 3 1 3

Reporting Method:

Accrual Basis ☐

Cash Basis ☒

Debtor's Full-Time Employees (current):

0

Debtor's Full-Time Employees (as of date of order for relief):

0

Supporting Documentation (check all that are attached):

(For jointly administered debtors, any required schedules must be provided on a non-consolidated basis for each debtor)

- ☐ Statement of cash receipts and disbursements
- ☐ Balance sheet containing the summary and detail of the assets, liabilities and equity (net worth) or deficit
- ☐ Statement of operations (profit or loss statement)
- ☐ Accounts receivable aging
- ☐ Postpetition liabilities aging
- ☐ Statement of capital assets
- ☐ Schedule of payments to professionals
- ☐ Schedule of payments to insiders
- ☒ All bank statements and bank reconciliations for the reporting period
- ☐ Description of the assets sold or transferred and the terms of the sale or transfer

/s/Lawrence R. Perkins

Signature of Responsible Party

12/21/2021

Date

Lawrence R. Perkins

Printed Name of Responsible Party

355 S. Grand Ave. Suite 1450 Los Angeles, CA 90071
Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

Debtor's Name CRESTLLOYD, LLC.

Case No. 21-18205

Part 1: Cash Receipts and Disbursements		Current Month	Cumulative
a.	Cash balance beginning of month	\$161,579	
b.	Total receipts (net of transfers between accounts)	\$0	\$0
c.	Total disbursements (net of transfers between accounts)	\$58,926	\$87,476
d.	Cash balance end of month (a+b-c)	\$102,653	
e.	Disbursements made by third party for the benefit of the estate	\$0	\$0
f.	Total disbursements for quarterly fee calculation (c+e)	\$58,926	\$87,476

Part 2: Asset and Liability Status (Not generally applicable to Individual Debtors. See Instructions.)		Current Month
a.	Accounts receivable (total net of allowance)	\$0
b.	Accounts receivable over 90 days outstanding (net of allowance)	\$0
c.	Inventory (Book <input type="radio"/> Market <input type="radio"/> Other <input checked="" type="radio"/> (attach explanation))	\$0
d.	Total current assets	\$102,653
e.	Total assets	\$325,102,653
f.	Postpetition payables (excluding taxes)	\$0
g.	Postpetition payables past due (excluding taxes)	\$0
h.	Postpetition taxes payable	\$0
i.	Postpetition taxes past due	\$0
j.	Total postpetition debt (f+h)	\$0
k.	Prepetition secured debt	\$176,602,734
l.	Prepetition priority debt	\$0
m.	Prepetition unsecured debt	\$3,491,513
n.	Total liabilities (debt) (j+k+l+m)	\$180,094,247
o.	Ending equity/net worth (e-n)	\$145,008,406

Part 3: Assets Sold or Transferred		Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	\$0	\$0
b.	Total payments to third parties incident to assets being sold/transferred outside the ordinary course of business	\$0	\$0
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$0	\$0

Part 4: Income Statement (Statement of Operations) (Not generally applicable to Individual Debtors. See Instructions.)		Current Month	Cumulative
a.	Gross income/sales (net of returns and allowances)	\$0	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	\$0	
c.	Gross profit (a-b)	\$0	
d.	Selling expenses	\$0	
e.	General and administrative expenses	\$58,926	
f.	Other expenses	\$0	
g.	Depreciation and/or amortization (not included in 4b)	\$0	
h.	Interest	\$0	
i.	Taxes (local, state, and federal)	\$0	
j.	Reorganization items	\$0	
k.	Profit (loss)	\$-58,926	\$-87,476

Debtor's Name CRESTLLOYD, LLC.

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Part 5: Professional Fees and Expenses

a.			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
	Debtor's professional fees & expenses (bankruptcy) <i>Aggregate Total</i>		\$267,048	\$315,094	\$0	\$0
	<i>Itemized Breakdown by Firm</i>					
		Firm Name	Role			
	i	SierraConstellation Partners, LL	Financial Professional	\$148,660	\$168,730	\$0
	ii	Levene, Neale, Bender, Yoo &	Lead Counsel	\$81,138	\$98,198	\$0
	iii	Ted Lanes	Financial Professional	\$14,119	\$19,175	\$0
	iv	Brutzkus Gubner	Lead Counsel	\$23,132	\$28,992	\$0

b.			Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
	Debtor's professional fees & expenses (nonbankruptcy) <i>Aggregate Total</i>					
	<i>Itemized Breakdown by Firm</i>					
		Firm Name	Role			
	i					
	ii					
c.	All professional fees and expenses (debtor & committees)					

Part 6: Postpetition Taxes

	Current Month	Cumulative
a. Postpetition income taxes accrued (local, state, and federal)	\$0	\$0
b. Postpetition income taxes paid (local, state, and federal)	\$0	\$0
c. Postpetition employer payroll taxes accrued	\$0	\$0
d. Postpetition employer payroll taxes paid	\$0	\$0
e. Postpetition property taxes paid	\$0	\$0
f. Postpetition other taxes accrued (local, state, and federal)	\$0	\$0
g. Postpetition other taxes paid (local, state, and federal)	\$0	\$0

Part 7: Questionnaire - During this reporting period:

- | | | |
|--|--------------------------------------|---|
| a. Were any payments made on prepetition debt? (if yes, see Instructions) | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| b. Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions) | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| c. Were any payments made to or on behalf of insiders? | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| d. Are you current on postpetition tax return filings? | Yes <input checked="" type="radio"/> | No <input type="radio"/> |
| e. Are you current on postpetition estimated tax payments? | Yes <input checked="" type="radio"/> | No <input type="radio"/> |
| f. Were all trust fund taxes remitted on a current basis? | Yes <input checked="" type="radio"/> | No <input type="radio"/> |
| g. Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions) | Yes <input type="radio"/> | No <input checked="" type="radio"/> |
| h. Were all payments made to or on behalf of professionals approved by the court? | Yes <input type="radio"/> | No <input type="radio"/> N/A <input checked="" type="radio"/> |

Debtor's Name CRESTLLOYD, LLC.

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- i. Do you have: Worker's compensation insurance? Yes ☐ No ☒
If yes, are your premiums current? Yes ☐ No ☐ N/A ☒ (if no, see Instructions)
Casualty/property insurance? Yes ☒ No ☐
If yes, are your premiums current? Yes ☒ No ☐ N/A ☐ (if no, see Instructions)
General liability insurance? Yes ☒ No ☐
If yes, are your premiums current? Yes ☒ No ☐ N/A ☐ (if no, see Instructions)
- j. Has a plan of reorganization been filed with the court? Yes ☐ No ☒
- k. Has a disclosure statement been filed with the court? Yes ☐ No ☒
- l. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930? Yes ☒ No ☐

Part 8: Individual Chapter 11 Debtors (Only)

- | | |
|--|---|
| a. Gross income (receipts) from salary and wages | \$0 |
| b. Gross income (receipts) from self-employment | \$0 |
| c. Gross income from all other sources | \$0 |
| d. Total income in the reporting period (a+b+c) | \$0 |
| e. Payroll deductions | \$0 |
| f. Self-employment related expenses | \$0 |
| g. Living expenses | \$0 |
| h. All other expenses | \$0 |
| i. Total expenses in the reporting period (e+f+g+h) | \$0 |
| j. Difference between total income and total expenses (d-i) | \$0 |
| k. List the total amount of all postpetition debts that are past due | \$0 |
| l. Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)? | Yes <input type="radio"/> No <input checked="" type="radio"/> |
| m. If yes, have you made all Domestic Support Obligation payments? | Yes <input type="radio"/> No <input type="radio"/> N/A <input checked="" type="radio"/> |

Debtor's Name CRESTLLOYD, LLC.

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Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.

/s/ Lawrence R. Perkins

Signature of Responsible Party

Chief Executive Office of Manager

Title

SierraConstellation Partners, LLC, as Manager

Printed Name of Responsible Party

12/21/2021

Date

November 30, 2021 ■ Page 1 of 4

WELLS
FARGO

944 AIROLE WAY
THEODORE LANES - RECEIVER
655 DEEP VALLEY DR STE 125P
ROLLING HILLS ESTATES CA 90274-3615

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711

1-800-CALL-WELLS (1-800-225-5935)

En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (114)
P.O. Box 6995
Portland, OR 97228-6995

Your Business and Wells Fargo

Visit wellsfargoworks.com to explore videos, articles, infographics, interactive tools, and other resources on the topics of business growth, credit, cash flow management, business planning, technology, marketing, and more.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking	<input checked="" type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>
Business Bill Pay	<input type="checkbox"/>
Business Spending Report	<input checked="" type="checkbox"/>
Overdraft Protection	<input type="checkbox"/>

Statement period activity summary

Beginning balance on 11/1	\$161,579.15
Deposits/Credits	0.00
Withdrawals/Debits	- 58,926.00
Ending balance on 11/30	\$102,653.15

Account number: [REDACTED] **9517**

944 AIROLE WAY
THEODORE LANES - RECEIVER

California account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): [REDACTED]

For Wire Transfers use

Routing Number (RTN): [REDACTED]

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.



Transaction history

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
11/1		California Fair Vendor Pmt 211029 #158931428 CA Fair Plan		8,244.00	153,335.15
11/8		Direct Pay Individual Pymt Trans		1.00	
11/8		Direct Pay WF Business Pymt Trans		3.00	
11/8		Direct Pay Nonwf Bus Pymt Trans		3.00	
11/8		Direct Pay Monthly Base		10.00	153,318.15
11/22		WF Direct Pay-Payment- Airole Pool-Tran ID Dp22211868		1,800.00	151,518.15
11/30		Zelle to Arrazola Yaly on 11/30 Ref #Rp0Cz3Vtkr Through October 31 2021		1,200.00	
11/30		Zelle to Agudelo Jesus on 11/30 Ref #Rp0Cz3W2Mc Through November 30 2021		2,040.00	
11/30		WF Direct Pay-Payment- October 31 2021-Tran ID Dp22837808		1,200.00	
11/30		WF Direct Pay-Payment- Draken Through Nov 30 2021-Tran ID Dp22837810		44,425.00	102,653.15
Ending balance on 11/30					102,653.15
Totals			\$0.00	\$58,926.00	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 11/01/2021 - 11/30/2021	Standard monthly service fee \$10.00	You paid \$0.00
How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following account requirements		
• Average ledger balance	\$1,000.00	\$151,153.00 <input type="checkbox"/>
• Minimum daily balance	\$500.00	\$102,653.15 <input type="checkbox"/>

C1/C1

Account transaction fees summary

Service charge description	Units used	Units included	Excess units	Service charge per excess units (\$)	Total service charge (\$)
Cash Deposited (\$)	0	5,000	0	0.0030	0.00
Transactions	6	100	0	0.50	0.00
Total service charges					\$0.00

Other Wells Fargo Benefits

Our National Business Banking Center customer service number 1-800-CALL-WELLS (1-800-225-5935) hours of operation have temporarily changed to 7:00 a.m. to 11:00 p.m. Eastern Time, Monday through Saturday and Sunday 9:00 a.m. to 10:00 p.m. Eastern Time. Access to our automated banking system, the ability to report a fraud claim on your business credit or debit card, and access to report a lost or stolen business card will continue to be available 24 hours a day, 7 days per week. Thank you for banking with Wells Fargo. We appreciate your business.



General statement policies for Wells Fargo Bank

- Notice: Wells Fargo Bank, N.A. may furnish information about accounts belonging to individuals, including sole proprietorships, to consumer reporting agencies. If this applies to you, you have the right to dispute the accuracy of information that we have reported by writing to us at: Overdraft Collections and Recovery, P.O. Box 5058, Portland, OR 97208-5058.

You must describe the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that relates to an identity theft, you will need to provide us with an identity theft report.

- If your account has a negative balance: Please note that an account overdraft that is not resolved 60 days from the date the account first became overdrawn will result in closure and charge off of your account. In this event, it is important that you make arrangements to redirect any automatic payments you receive. The closure will be reported to Early Warning Services. We reserve the right to close and/or charge-off your account at an earlier date, as permitted by law. The laws of some states require us to inform you that this communication is an attempt to collect a debt and that any information obtained will be used for that purpose.

Account Balance Calculation Worksheet

1. Use the following worksheet to calculate your overall account balance.
2. Go through your register and mark each check, withdrawal, ATM transaction, payment, deposit or other credit listed on your statement. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.
3. Use the chart to the right to list any deposits, transfers to your account, outstanding checks, ATM withdrawals, ATM payments or any other withdrawals (including any from previous months) which are listed in your register but not shown on your statement.

ENTER

A. The ending balance
shown on your statement \$

ADD

B. Any deposits listed in your register or transfers into your account which are not shown on your statement.

	\$	_____
	\$	_____
	\$	_____
	+	\$ _____

..... TOTAL \$ _____

CALCULATE THE SUBTOTAL
(Add Parts A and B)

..... TOTAL \$

SUBTRACT

C. The total outstanding checks and
withdrawals from the chart above..... - \$

CALCULATE THE ENDING BALANCE
(Part A + Part B - Part C)

This amount should be the same as the current balance shown in your check register. \$

[illegible]

Total amount \$